## ORDER FOR CERTIFIED COPY OF BIRTH CERTIFICATE

FOR ALL PERSONS BORN IN SEATTLE OR KING COUNTY (ALL YEARS) ALSO ALL WASHINGTON STATE BIRTHS REGISTERED FROM 1921 FORWARD

## **VITAL STATISTICS**

Public Health - Seattle & King County Box 359784 325 Ninth Ave Seattle, WA 98104-2499

QT	Y CERTIFIED COPY		Y	@ \$20.00 EA. = \$		
MA	KE CHECK PAY	ABLE TO VITAL STAT	ISTICS TOT	FAL ENCLOSED \$		
Nar	ne of Child:	First	Middle	Last		
Birt	hdate:		City of birth:			
	spital:			If adopted child, check here		
	l Name F ather:	First	Middle	Last		
	l Name F Mother:	First	Middle	Last (Birth/Maiden)		
SIGNED: DATE:						
RELATIONSHIP TO PERSON WHOSE CERTIFICATE IS REQUESTED?  ☐ SELF ☐ PARENT ☐ OTHER (SPECIFY):						
<b>Please Note:</b> Any time a record is searched for and not found, an \$8.00 search fee is charged per the Revised Code of Washington (RCW 70.58.107).					BIRTH	
				OFFICE USE ON	ILY	
					CK. MO. ☐ CASH ☐	
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					AMT. RC'D \$	
					AMT. RC'D \$ INDEX NO. YR. REC. SRCH. □	
					INDEX NO. YR. REC.	
					INDEX NO. YR. REC. SRCH. □	
	Name and ad	dress of person requ	esting certified cop	эу:	INDEX NO. YR. REC. SRCH. □	
RINT	NAME	, ,	esting certified cop	by:	INDEX NO. YR. REC. SRCH. □	
SE PRINT		, ,	esting certified cop	oy:	INDEX NO. YR. REC. SRCH. □	
PLEASE PRINT	NAME	NUMBER	esting certified cop	oy:	INDEX NO. YR. REC. SRCH. □	